

Work Plan No. 02-8606-23-W1

Revision 0

NUS/FIT REGION II
MANAGEMENT/TASK WORK PLAN
FOR THE
WEITSMAN SALVAGE YARD
Preliminary Assessment

LOCATED IN

Owego, Tioga County, NY

Prepared by: Andrew Hopton
Date: 6/27/86

Distribution:

Name Initial/Date

DENICE TAYLOR DT/7/7/86

Reviews and Approvals

Quality Assurance Representative:

Robert L. Latta

Date: 7/2/86

Regional Project Manager:

B. Taylor

Date: 7/2/86



PROJECT SUMMARY

TDD No.: 02-8606-23 US EPA Site No.: New
Site/Project Name: WEITSMAN SALVAGE YARD
Location: 15 West Main St., Owego, NY.
NUS/FIT Project Manager: Ron Naman
EPA Site Manager/Contact: Diana Messina
State Site Manager/Contact: Charles Goddard
Date TDD Opened: 6/26/86 Date of Completion: 7/31/80
Estimated Technical Hours: 55 Estimated Subcontract Cost: N/A
Account No. 0400.01, TDD Priority (✓): High, X Medium, Low

Summary of Assignment (Attach copy of TDD as Attachment A):

See attached TDD

Attach And Reference Additional Sheets If Necessary

PROJECT SUMMARY (cont'd)

Deliverable/Final Product to EPA (e.g. reports, etc):

Four page Preliminary Assessment (PA) Report

(Includes EPA Form 2070-12 and supporting documentation)

Deliverable/Final Product Review Process:

This only applies to the final TDD deliverable to EPA

Review Scope (✓):

X Review for conformance to project control documents.
(ie. the TDD and this workplan).

X Review for technical and editorial content.

Required Review and Approvals (✓):

X Technical Supervisor

X Review Committee, If applicable list names or disciplines.

A qualified reviewer not involved with deliverable preparation
will be selected.

X QA Representative

X Regional Project Manager or designee (ie. ARPM)

Site History/Description:

Prepare brief description of the site (landfill, drum storage, etc.), conclusions from past data assessments, and indicate the current or past operators.

Weitsman Salvage Yard is an active property metal
Salvage operation located along West Main St. It is 7.5
acres and open on the south & East End. Industrial
Waste from the Tioga Casting Facility was dumped on
the site ^{For use as Fill} in the late 1970s and ending in 1979. Waste consisted
of sand from old sanding molds. Bonding agent in sand
was phenol - Formaldehyde. Not known how much phenol - Formaldehyde
in sand.

PROJECT OVERVIEW

Technical Approach (Reference sampling plan, if attached):

All P.A. activities will be conducted in accordance with NUS Operating

Guidelines Manual section 4.15 "Preliminary Assessments", Draft 2, 7-16-84

Attach and Reference Additional Sheets If Necessary

Personnel Assignments:

List personnel assignment(s) for each TDD task or specific element.

<u>TDD Specific Element</u>	<u>Required Discipline(s)</u>	<u>Number of Persons Required</u>	<u>Responsibilities/Duties</u>
1		1	Project Manager (PM) - Responsible for locating and assembling all relevant background information.
1		1	Assistant to PM in obtaining and assembling relevant background information.
2		1	PM - Responsible for review and evaluation of relevant background information necessary to develop PA Report. Additionally will plan and conduct off-site reconnaissance if necessary.
2		1	Assistant to PM - Responsible for documentation during off-site reconnaissance.

Revision 0

Personnel Assignments (Cont'd)

[illegible]

PROJECT OVERVIEW (cont'd)

Schedule of Activities:

Check off as appropriate.

☒ See copy of TDD provided as attachment A.

☐ See attachment A-1

Referenced Background Data:

List background reference material (Usually provided by US EPA).

Wehran Engineering SI, HRS, PA
NYDEC "Hazardous Waste Disposal Sites Report"
Letters & Permits From NYDEC concerning site &
Triax Casting.

Attach And Reference Additional Sheets If Necessary

Safety and Health Considerations:

Refer to the attachment B, the site safety plan which has been approved by the Regional Safety Officer and RPM.

Ref#: 02-8606-23 -S1

Date: LY 7/7/86
(Safety Officer Approval Date)

*If required, include Special Analytical Services (SAS) cost estimates.

PROJECT OVERVIEW (cont'd)

Required Resource List (For equipment, list major items only):

Reference to attached list is acceptable

[illegible]

* If measuring or test equipment is needed, indicate whether its required use is for health and safety screening or for evidentiary data collection.

Interface/Planning Requirements (Reference attachments if necessary):

Interface with EPA: FIT RPO, Diana Messina (201) 321-6776

Interface with State/Local Agencies: Background File Searches to be conducted at State
Offices.

Site Access Arrangements (site contact, etc.):

N/A

Community Relations Planning Requirements (Briefly described EPA approved protocol for
interface with media contacts): Any media or public inquiries concerning P.A. activities
associated with this site will be referred to EPA.

Training Requirements: N/A

RECORDS AND DOCUMENTATION

Check off records and documents that will support the validity and evidentiary value technical work conducted and environmental data collected.

<input checked="" type="checkbox"/> TDD/AOC	<input type="checkbox"/> Correspondence (Telecon notes, memos, letters, etc.)
<input checked="" type="checkbox"/> Work Plan	
<input checked="" type="checkbox"/> Safety Plan	<input checked="" type="checkbox"/> Deliverables to EPA (List below)
<input checked="" type="checkbox"/> Work Plan/Safety Plan	
Distribution Documentation	4 Page P.A. Report
<input type="checkbox"/> Calibration and maintenance records for measuring and test equipment (for HNu, OVA etc.)	
<input checked="" type="checkbox"/> Written Documentation of Field activities (ie Log books notes, calculations etc.)	<input checked="" type="checkbox"/> Records of Review and approvals for project control documents and deliverables
<input checked="" type="checkbox"/> Photographic Documentation of Field activities	<input checked="" type="checkbox"/> Q.A. records log
<input type="checkbox"/> Soil Stratigraphic Records (drilling logs etc.)	

Procurement Documents (Specify below requests for bids and proposals, subcontract consultant agreements, etc.):

N/A

Other documents and records (Specify below):

N/A

REFERENCED TECHNICAL GUIDANCE FOR PROJECT ACTIVITIES

Reference the appropriate technical guidance which will apply to technical project activities performed during the course of this project. The primary reference is the NUS Superfund Division Operating Guidelines Manual (OGM). When applicable, other EPA accepted standard operating guidelines (SOG) and procedures (SOP) may be referenced.

Technical guidance must be specifically referenced. If portions of the OGM are referenced, indicate the OGM section and, if applicable, the subsection. Reference of EPA SOG's and SOP's must indicate the publication title, number and date.

If a technical project activity is not applicable indicate "NA". If a technical project activity is not provided, list it under "other" (see page 10 of 11) and reference applicable technical guidance.

<u>Reference</u>	<u>Technical Project Activity</u>
<u>N/A</u>	Ambient Air Sampling (OVA, HNU, etc.)
<u>N/A</u>	Ground-Water Sampling
<u>N/A</u>	Surface-Water Sampling
<u>N/A</u>	Soil/Sediment Sampling
<u>N/A</u>	Tap Water Sampling
<u>N/A</u>	Land Surveying
<u>N/A</u>	Electrical Resistivity Survey
<u>N/A</u>	Electromagnetic Survey
<u>N/A</u>	Magnetometer Survey
<u>N/A</u>	Metal Detection Survey
<u>N/A</u>	Ground Penetrating Radar Survey
<u>N/A</u>	Seismic Survey
<u>N/A</u>	Water Level Measurements
<u>N/A</u>	Perimeter Survey
<u>N/A</u>	Site Inspection
<u>N/A</u>	Soil Borings/Well Installation
<u>N/A</u>	Bedrock Fracture Analysis
<u>N/A</u>	Pump/Permeability Tests
<u>N/A</u>	Preparation of Water Table Maps
<u>N/A</u>	Preparation of Bedrock Contour Maps

[illegible]

QA PROGRAM APPLICABILITY

The following portions of the NUS Superfund Division Quality Assurance Manual are applicable to the performance of specific work activities defined in TDD # 02-8606-23.

(✓)	Number	Subject
<u>X</u>	QAP 2.5	Work Plans
<u>—</u>	QAP 3.1	Control of Remedial Design Activities
<u>—</u>	QAP 3.2	Drawing Control
<u>—</u>	QAP 3.3	Design Calculations
<u>X</u>	QAP 4.1	Field Data Collection
<u>—</u>	QAP 4.2	Data Reduction, Validation, and Reporting
<u>—</u>	QAP 5.1	Preparation of Procurement Documents
<u>—</u>	QAP 5.2	Subcontractor Quality Assurance Requirements
<u>—</u>	QAP 6.1	Preparation of Instructions and Procedures
<u>X</u>	QAP 7.1	Identification of Controlled Evidentiary Documents
<u>X</u>	QAP 7.2	Issuance and Distribution of Controlled Documents
<u>—</u>	QAP 7.3	Development, Documentation, Verification, and Retention of Software Programs
<u>X</u>	QAP 7.4	Technical Reports
<u>—</u>	QAP 8.1	Control of Subcontractor Procurement Activities
<u>—</u>	QAP 8.2	Evaluation and Selection of Subcontractors
<u>—</u>	QAP 9.1.F2	Chain of Custody
<u>—</u>	QAP 9.2.F2	Sample Control
<u>—</u>	QAP 10.1	Analysis Techniques
<u>X</u>	QAP 11.1	Offsite Reconnaissance
<u>—</u>	QAP 11.2	Onsite Inspections
<u>—</u>	QAP 12.1	Implementation of Measuring and Test Equipment Controls
<u>—</u>	QAP 13.1	Packaging, Marking, Labeling, and Shipping of Samples from Hazardous-Waste Sites
<u>X</u>	QAP 14.1	Nonconformance Reporting, Evaluation, and Disposition
<u>X</u>	QAP 15.1	Implementation and Documentation of Corrective Actions
<u>X</u>	QAP 16.1	Storage and Retrieval of Quality Assurance Records and SFD Project Files
<u>—</u>	QAP 17.4	Preparation for Audit
<u>—</u>	QAP 17.6	Quality Notices

WPF

Work Plan No. 02-8606-23-W1

Revision

0

ATTACHMENT A

TDD

(Attach Copy of TDD)

Re 02-8606-23-w1

1. COST CENTER: F-2	REM/FIT ZONE CONTRACT TECHNICAL DIRECTIVE DOCUMENT (TDD)			2. NO.: 02-8606-23	
ACCOUNT NO.: 0400.01					
3. PRIORITY: <input type="checkbox"/> HIGH <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> LOW	4. ESTIMATE OF TECHNICAL HOURS: <div style="text-align: center; font-weight: bold;">55</div>	5. EPA SITE ID: 	6. COMPLETION DATE: <div style="text-align: center;">7/31/86</div>	7. REFERENCE INFO.: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> ATTACHED <input type="checkbox"/> PICK UP	
8. GENERAL TASK DESCRIPTION: <u>WEITSMAN SALVAGE YARD</u> <u>Owego, New York, Tioga County</u> <u>Preliminary Assessment</u>					
9. SPECIFIC ELEMENTS: <u>1. Conduct File Search Of U.S. EPA, State EPA, And/Or Local</u> <u>Municipal And/Or Health Agency Files</u> <u>2. Review And Evaluate Available Information And Conduct Off-Site</u> <u>Reconnaissance If Necessary</u> <u>3. Submit Four-Page Preliminary Assessment Report</u> <u>(Includes EPA Form 2070-12)</u>				10. INTERIM DEADLINES: <u>7/10/86</u> <u>7/17/86</u> <u>7/31/86</u>	
11. DESIRED REPORT FORM: FORMAL REPORT <input checked="" type="checkbox"/> LETTER REPORT <input type="checkbox"/> FORMAL BRIEFING <input type="checkbox"/> OTHER (SPECIFY): _____					
12. COMMENTS: <u>Overtime Approved</u>					
13. AUTHORIZING RPO: <div style="display: flex; justify-content: space-between;"> <u>Diana Messina</u> (SIGNATURE) </div>				14. DATE: _____	
15. RECEIVED BY: <input type="checkbox"/> ACCEPTED <input type="checkbox"/> ACCEPTED WITH EXCEPTIONS <input type="checkbox"/> REJECTED <div style="display: flex; justify-content: space-between;"> <u>Ronald M. Naman</u> (CONTRACTOR RPM SIGNATURE) </div>				16. DATE: _____	

WPF

Work Plan No. 02-8606-23 -W1

Revision 0

ATTACHMENT B

SAFETY PLAN

(Must have Identifying Control #)

ABBREVIATED SITE SAFETY PLAN FOR OFF-SITE RECONNAISSANCE

SITE NAME: Weitsman Salvage Yd TDD NO: 02-8606-23ADDRESS: ~~15 West Main St.~~ 15 West Main St.
Owego, NY Tioga CountyPURPOSE OF SITE VISIT: Preliminary InvestigationPROPOSED DATE OF WORK: 7- -86

PROPOSED SITE INVESTIGATION TEAM: Individuals will be listed in the field notebook.

SITE STATUS: ☒ Active ☐ Inactive ☐ UnknownSITE DESCRIPTION: 7.5 acre active metal salvage yard.Sand from casting molds was dumped as fill during late 1970s.Site has office and large manufacturing facility. Various piles of junked cars & metal are in yard.SITE HISTORY: Sand from casting molds from Tioga casting facility was dumped on site in the late 1970s. Sand contains an unknown amount of Phenol-Formaldehyde.

PERIMETER ESTABLISHMENT: All work will be conducted off-site from public access areas.

Perimeter identified?

YES Fenced on North & West side

MONITORING EQUIPMENT:

☐ HNU☒ TLD Badge☐ OVA☐ Radiation mini-alert☐ Victoreen Radiation Detector

PLAN PREPARATION:

Prepared by: Andrew Hopton

(6/27/86)

Approvals:

Regional Health & Safety Manager:

Laurie H. H. H. H.

(7/7/86)

Regional Project Manager:

J. B. L.

(7/8/86)

EMERGENCY INFORMATION:**LOCAL RESOURCES:**Area Code 607

Ambulance (Name): Owego Vol.
 Hospital (Name): Tioga General in Waverly
 Police (Local or State): Local Police
 Fire Dept. (Name & Volunteer?): Owego Vol.
 Radio Channel: _____
 Nearest Phone: _____

Phone 687-1313
 Phone 565-2861
 Phone 687-2233
 Phone 687-2233 or 687-1313

OFFICE RESOURCES:

Region II FIT Office
 Diana Messina-EPA RPO
 Ron Naman-RPM
 Rich Califano-ARPM
 Laurie Gneiding-RHSM
 Tom Centi-ZPMO

201-225-6160
 201-321-6776 (office)
 201-873-0166 (home)
 914-337-3423 (home)
 201-534-2907 (home)
 703-522-8802 (office)

EMERGENCY CONTACTS: (Medical and Health)

- o Dr. David K. Parkinson (NUS Consulting Physicians - University of Pittsburgh)
 Dr. Hodgson

24 Hour Number

412-624-0127

Say that you are from NUS Corporation and that this is an emergency call.
 Nights and weekends you must give your name and number where the physician can call you back.

- o Gary Smith (NUS Zone Health and Safety Manager)

Office
 Home

412-788-1080
 412-695-3667

- o Regional Health Maintenance Program
 Gateway Health Services

Dr. Edward Holstein

201-225-5454

- o Poison Information Center

NJ 800-962-1253
 NY 201-926-8005

DIRECTIONS TO HOSPITAL (Attach Map): Tioga County General in Waverly

Take 17C west to Waverly, get off at Exit 61
take left off of ramp onto rt 852 north. Turn left onto
Chemung Street and after 1/8 mile will see American
 legion on right turn right here onto North Chemung St.
 Hospital Address is 37 North Chemung St.

